

Testimony of Michael J. Dunkley

Good afternoon and thank you to Senator Stabenow and the DPCC for inviting me to participate today. My name is Michael Dunkley, I am 64 years old, and I am from Alexandria, Virginia. I am here today to tell you my experience with the health care system over the last several years.

In the summer of 2013, I began to experience increasing back pain and shortly after discovered a bulge in my side. After several appointments and tests, on October 4th, 2013, I was diagnosed with aggressive, advanced and wide-spread Stage 4 non-Hodgkins lymphoma cancer and was immediately put on an extremely powerful 5-component chemotherapy treatment program that would conclude in late January, 2014. I worked as an audiovisual contractor, but had gotten laid off in 2012, so my medical insurance coverage at the time of my diagnosis was under the terms of COBRA, and my monthly premium was \$875, with a \$7,500 deductible and a \$15,000 out-of-pocket limit. Several days after my diagnosis, I signed up with and established an account through the HealthCare.Gov web-portal for Virginia, this exchange being a key component of the new law that would have its initial roll-out and activation on January 1st, 2014, the 1st day the Patient Protection and Affordable Care Act would take effect.

My COBRA coverage expired at midnight on December 31st, 2013, and was immediately replaced with a new health insurance plan that I had purchased through the provisions of the Patient Protection and Affordable Care Act. Because of this new law, I knew that I would have health insurance coverage as I continued my fight against this disease. I could not be denied coverage due to a pre-existing condition (advanced cancer), and I purchased a plan that was far superior in medical coverage and cost \$575 per month, with no deductible and an \$1,850 out-of-pocket limit. 3 days after receiving my new health insurance coverage, I was infused with my 5th-round of chemotherapy, for which I was charged \$35,000. Near the end of January, 2014, I received a 6th-dose of chemotherapy and was billed another \$35,000. 2 weeks after my 6th chemotherapy treatment, I was given a PET-CT nuclear scan that cost \$5,000, and 1 week after that, on February 14th, 2014, my wife and I were told by my oncologist that my advanced cancer had gone into complete remission. As I am the sole caregiver for my wife, who has advanced Multiple Sclerosis and is disabled, the news of the cancer's remission was a life-saver for her, as well as for myself. Months after my remission from cancer was announced, complications from the chemotherapy caused both of my hips to break, which required that I receive 2 hip-replacement surgeries that generated an additional \$130,000 in medical bills. Once again, the provisions within the Patient Protection and Affordable Care Act allowed me to continue receiving appropriate medical care at a price that I could afford to pay.

I am now 64 and will qualify for Medicare later this year. However, continuing to have affordable and quality health insurance has been a life-saver for me. Beyond my pre-existing condition, the affordability of this coverage has been key. The Republicans' plan would not only scale back the protections for people like me – cancer survivors who have a pretty significant pre-existing condition – but would also punish me for getting older by charging me more than 5 times as much as younger enrollees. Simultaneously, the Republican plan would create a one-size-fits-all subsidy for all 64-year-olds out there that would not begin to make up this difference. According to AARP, this could mean an increase in premiums of more than \$8,000 each year, not to mention the newest part of the bill that would, once again, allow insurers to discriminate against those like me who have pre-existing conditions.

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Put simply, I needed both parts of health reform: Patient Protection and Affordability. Had it not been for the Patient Protection and Affordable Care Act, I would not have been able to purchase any health-care insurance, for any price, due to my pre-existing condition of having cancer. Had it not been for the income subsidy, I would not have been able to afford to pay the premium for insurance comprehensive enough to cover my on-going and extremely expensive cancer treatments, a health-insurance plan which has saved my life.

Thank you to those in this room who were here to vote in favor of that truly life-saving law and thank you for the opportunity to share my story with you today.